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CURRENT CORRESPONDENCE 24201 7.	CE ADDRESS (Note: Use Block 1 for 590 09/30/2005	any change of address)			Note: A certification Fee(s) Transmitt papers. Each add	ate of ma tal. This o ditional p	ailing can only be used for	or domestic mailings of the for any other accompanying ent or formal drawing, must
FULWIDER PA HOWARD HUGH 6060 CENTER DF TENTH FLOOR		HT, LLP			I hereby certify States Postal Ser addressed to the transmitted to the	that this I rvice with e Mail S	icate of Mailing or Trans Fee(s) Transmittal is bein a sufficient postage for fir top ISSUE FEE address (571) 273-2885, on the c	g deposited with the United st class mail in an envelope above, or being facsimile
LOS ANGELES, O	CA 90045				Howard	N. Sc	ommers	(Depositor's name)
					Unvare	N.	Somme	(Signature)
					14/5/0	>5		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED	INVEN	TOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.
10/613,329	07/03/2003		Ramon l	Vavarro			MAEST-63843	5055
APPLN, TYPE	SMALL ENTITY	ISSUE F	EE	PU	JBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	)		\$0		\$700	12/30/2005
EXAM	INER	ART UN	пт	CI	ASS-SUBCLASS			
WATSON,	ROBERT C	3723		-	269-006000			
CFR 1.363).  Change of correspond Address form PTO/SB/1  "Fee Address" indica	dence address or indication of "Foreign address" (or Change of 22) attached.  tion (or "Fee Address" Indication more recent) attached. Use	Correspondence	(1) the nar or agents ( (2) the nan registered 2 registere	mes of to OR, alterne of a sattorney d patent	the patent front part to 3 registered matively, single firm (having or agent) and the attorneys or agentle be printed.	l patent a	ember a 2	ler Patton LLP
	PRESIDENCE DATA TO B s an assignce is identified be a 37 CFR 3.11. Completion of EE	low, no assignee	data will appo	ear on t	he patent. If an	assignee R COUN	is identified below, the d TRY)2/20/2005 HDEM 01 FC:2501	locument has been filed for ESS2 00000035 1061332 70
Please check the appropriate	e assignee category or catego	ries (will not be pr	rinted on the pa	atent) :	☐ Individual	☐ Corp	oration or other private gr	oup entity Government
4a. The following fee(s) are				in the an	nount of the fee(s	•		
☐ Publication Fee (No s☐ Advance Order - # o	small entity discount permitte f Copies				it card. Form PTC nereby authorized mber <u>06-24</u> ;			iencies only* credit any overpayment, to copy of this form).
a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.					ENTITY status. See 37 C	
NOTE: The Issue Fee and P interest as shown by the rec	is requested to apply the Issu bublication Fee (if required) words of the United States Pate	vill not be accepted and Trademark	d from anyone Office.	other th	nan the applicant;			
Authorized Signature	Howard N. S	ommules			Date_	り	cember 15,	2005
Typed or printed name	Howard N. Sc	mmers			Regist	tration No	24,138	

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OIPE				Application Numbe	er	10/613,329		
PEC 1 9 2005	TRA	NSMITTA	۸L	Filing Date		07/03/2003		
	/	FORM		First Named Invent	tor	Navarro		
BAREMARKS)			:	Art Unit		3727		
	(to be used for a	all correspondence after	initial filing)	Examiner Name		Watson		
	Total Number of P	ages in This Submission		Attorney Docket Nu	umber	MAEST-63843		
			ENCLOS	JRES (Check all t	hat apply)			
	Fee Transmitta	al Form	Drawing(	s)		After Allowance Communication to TC		
5	Fee Att	tached	Licensing	related Papers		Appeal Communication to Board of Appeals and Interferences		
	Amendment /	Reply	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply		
•	After	Final		o Convert to a at Application		Proprietary Information		
	Affida	vits/declaration(s)		Attorney, Revocation of Correspondence Add	tress	Status Letter		
	Extension of 1	Time Request	Terminal Disclaimer			Other Enclosure(s) (please identify below):		
•	Express Aban	donment Request	Request for Refund  CD, Number of CD(s)			PTOL-85 - Fee(s) Transmittal for Issue Fee		
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		isclosure Statement		Landscape Table on C	D _			
	Certified Copy Document(s)	•	Remarks					
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		to Missing Parts under						
	3, 0,	17 7.02 01 7.00						
		SIGNATUR	RE OF APPLICA	NT, ATTORNEY, OF	R AGENT			
	Firm Name	Fulwider Patton LLP						
	Signature	Howard N.	Sommers					
	Printed name	Howard N. Sommers						
	Date	December K	5, 2005 Reg. N		Reg. No.	24, 138		
		CE	RTIFICATE OF	TRANSMISSION	N/MAILIN	G		
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	Signature	Knows	N. Somu	uls	<del> <u>-</u></del>			
	Typed or printed name Howard N. Sommers				Date	12/18/05		

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PTO/SB/17 (12-04v2)
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Effective on 2008/20	004.	Complete if Known				
Fees pursualitie the Consolidated Appro	opriatoris Act, 2005 (H.R.	Application Number	10/613,329			
<b>FEE TRANSI</b>	WIIIAL	Filing Date	07/03/2003			
for FY 200	15	First Named Inventor	Navarro			
		Examiner Name	Watson			
Applicant claims small entity status	s. See 37 CFR 1.27	Art Unit	3727			
TOTAL AMOUNT OF PAYMENT	(\$) \$700.00	Attorney Docket No.	MAEST-63843			
METHOD OF PAYMENT (check al	I that apply)					

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METHOD OF PAYMENT (check all that apply)								
⊠ Check ☐ Cre	dit Card	Money Order	None	Other (	please identify):			
Deposit Account Number: 06-2425 Deposit Account Name: Fulwider Patton								
For the above-identif	ied deposit accou	nt, the Director is	hereby auth	orized to: (check all	that apply)			
Char	ge fee(s) indicate	d below		Charge i	fee(s) indicated	below, except for	the filing fee	
Char	ge any additional	fee(s) or any und	lerpayment o	f Credit a	ny overpaymen	ts		
WARNING: Information card information and aut	on this form ma	y become public	c. Credit ca	d information sho	ould not be in-	cluded on this f	orm. Provide credit	
FEE CALCULATION				· · ·				
1. BASIC FILING, SEA	ARCH, AND EX	AMINATION F	EES		-		- <del></del> -	
	FILING F		SEARCH		EXAMINA	ATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid(\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FE	FS						Small Entity	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (in	cluding Reissue	es)				50	25	
Each independent clair	n over 3 (includ	ling Reissues)				200	100	
Multiple dependent clai	ims					360	180	
							Dependent Claims	
Total Claims	<u>Extra</u>	<u>Fee (\$)</u>		Fee Paid (\$)		<u>Fee (\$)</u>	Fee Paid (\$)	
20 or H		X\$		\$0.00_		-		
HP = highest number of to Indep. Claims	Extra	, ir greater triair 2		Fee Paid (\$)				
	D =	x\$1						
HP = highest number of in 3. APPLICATION SIZE	E FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<u>Total Sheets</u> - 10	Extra She			th additional 50 or (round up to a		of <u>Fee (\$)</u> x \$125.00		
	U – <u> </u>	/ 50	0	(10u1lu <b>up</b> 10 a	2 WITUIC	^ <u>3123.00</u>	Fee Paid (\$)	
<ol> <li>OTHER FEE(S)</li> <li>Non-English specificati</li> </ol>	on \$130 fee	(no small entity	/ discount)					
Other (e.g., late filing s							\$700.00	

4	SUBMITTED BY					
1	Signature	Howald. Samue	Registration No. (Attorney/Agent)	24,138	Telephone	310-824-5555
1	Name (Print/Type)	Howard N. So		Date	12/10/05	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.